

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishment Name Clucker's					Telephone Number	Date of In (mm/dd/y	r)
Establishment Address (number and street, city, state, zip code)						19/,	6/19 19-66
Establishme 4308		humber and street, city,	state, zip code) w Alban, !!	502 244 921	'/'	W 1 1	
Owner	<u> </u>		11-4-11		Purpose:	Follow-u	p Release Date
Chiker's . 114/ Maft Marky					Routine	NO	10 days
Owner's Address					2. Follow-up	Summary	y of Violations:
132 Mendon Dr. Sullersburg, 1rt 47172					3. Complaint	1 次	1 2 M
Person in Charge					4. Pre-Operational	[C	\times NC \angle R \bigcirc
Responsible Person's E-mail					5. Temporary 6. HACCP	Menu Ty	pe (See back of page)
Certified Food Manager Mike Scholer (9/22/20)					7. Other (list)	12	3 X 4 5
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R		Narrative			To Be Corrected By
297	NL	Observed be	ild-up an	inderior	of bulk-ice May local	bre	Corrected
304	MC	Observed co	ins being	wet star	la d		Corrected
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Received by (name and title printed):					Inspected by (name and title printed):		
MATT MUREY					A.). Ingram (EHS)		
Received by	y (signature):				Inspected by (signature):	· = ·1	
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